

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION
APPLICATION FOR CERTIFICATION AS AN
ATHLETIC COACH

Print or Type

Last First M.I.

Birth Name

Street

City or Town State Zip
offices and/or

(_____) _____
Telephone Number Date of Birth

____ - ____ - ____

Social Security Number

Privacy Notice

Disclosure of the Social Security Number is voluntary. It will be used by the Office of Certification as your certificate number and to notify other state certification

local school districts of the status of your certificate and/or for statistical studies.

Circle the Appropriate Letter/Number-(Response is Voluntary)

Race: A. Amer. Indian/Alaskan Native B. Asian/Pacific Islander
C. Black D. Hispanic E. White F. Other

Sex: 1. Male 2. Female

CERTIFICATION INFORMATION

1. Have you ever been dismissed from any employment or have you ever resigned or retired from any employment in order to avoid disciplinary action? If yes, explain on a separate sheet. ____ Yes ____ No
2. Are you facing disciplinary action in your present employment? If yes, explain on a separate sheet. ____ Yes ____ No
3. Have you ever been convicted of a felony or a misdemeanor? If yes, attach a copy of the conviction record(s). Expunged convictions must be disclosed under Rhode Island General Law 12-1.3-4. Attach a separate sheet stating the date, location and nature of the offense(s) involved in the expunged conviction. ____ Yes ____ No
4. Have you ever entered a plea of nolo contendere to a felony or misdemeanor charge? If yes, attach a copy of the conviction and/or probation record(s). ____ Yes ____ No
5. Are any misdemeanor or felony charges currently pending against you? If yes, explain on a separate sheet. ____ Yes ____ No
6. Do you hold a valid teaching certificate in any other state? ____ Yes ____ No
State _____ Area(s) _____ Certificate No. _____
7. Have you ever been denied a teaching certificate for reasons other than your failure to meet academic or experience requirements? If yes, give date, state, and reason on a separate sheet. ____ Yes ____ No
8. Has your teaching or coaching certificate ever been suspended, revoked, or surrendered in another state? If yes, give date, state, and reason on a separate sheet. ____ Yes ____ No
9. Are any proceedings to revoke or suspend your teaching or coaching certificate currently pending against you? If yes, explain on a separate sheet. ____ Yes ____ No
10. Have you ever held a Rhode Island teaching certificate? If yes, what was your certificate number? ____ Yes ____ No

(OVER)

NOTICE: Rhode Island General Law 11-18-1 prohibits the submission of a document containing a false and misleading statement to a public agency. Rhode Island General Law 11-58-1 prohibits the use of a falsified education record of a postsecondary institution.

Rhode Island General Law 16-1-4 provides that the Commissioner of Education may annul certificates "for cause." Rhode Island General Law 16-12-3 states that "Every teacher shall aim to implant and cultivate in the minds of all children committed to his care the principles of morality and virtue."

To the Board of Regents for Elementary and Secondary Education:

I hereby submit the above information as evidence of my qualifications for the certificate(s) requested. I certify the accuracy of the information provided in this application and in any supporting documentation I may submit. I understand that this information is subject to independent verification by the Department of Education.

Applicant's Signature

Date

Applications require a **non-refundable \$25.00 processing fee**. Checks are to be made payable to **General Treasurer, State of Rhode Island (cash is not accepted)**.

Please mail application fee and required documents to:

**Rhode Island Department of Education
Office of Teacher Preparation, Certification
& Professional Development
Shepard Building
255 Westminster St.
Providence, RI 02903-3400**

INSTRUCTIONS FOR COMPLETING THE COACH CERTIFICATIN APPLICATION

Chapter 16-11-1.1 of the General Laws of Rhode Island requires that all athletic coaches be properly certified PRIOR to being employed in an educational setting which requires certification.

1. **COMPLETE APPLICATION FORM:** Please TYPE or PRINT. All questions must be answered accurately and completely. Entry of false information could result in denial or revocation of your certificate.
2. **CERTIFICATION PROCESSING FEE:** A money order or personal check for \$25.00, payable to the GENERAL TREASURER, State of Rhode Island, must accompany each application. No application will be evaluated without the fee. **THE FEE IS NON-REFUNDABLE.** (Cash is not accepted.)
3. **DOCUMENTATION:** Attach a copy of the FRONT and BACK of your first aid card showing that you completed a Red Cross Community First Aid & Safety course, (formerly Standard First Aid) OR Sports Safety Training First Aid Basics.